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ABSTRACT

Legislative mandates in California and at the federal level require written parental consent for surveys of children and youth on: sexual behavior and attitudes; illegal, antisocial and criminal behavior; and psychological problems. Active parental refusal and nonresponse to requests for permission threaten the generalizability of information obtained in large-scale population surveys. The California Student Substance Use Survey, administered biennially since 1985, initiated an active consent policy for the most recent (1995-96) survey. Thirty-eight percent of the intended sample was lost as a result of the consent requirement--6% due to denial of permission and 32% due to failure to return consent forms. School level student data revealed that parental response rates correlated significantly and negatively with measures of poverty (percent on Assistance to Families with Dependent Children and percent on school food programs) and positively with measures of educational advancement (percent of seniors graduating and percent taking college preparatory courses), as well as with percent Asian students. The feasibility of proposed tactics for increasing response rate is explored, and these tactics are dismissed as impractical for large-scale surveys. The tendency of media and interested parties to ignore qualifications by researchers about the generalizability to the intended population of samples based on actual parental consent is noted. (Contains three tables and eight references.) (Author/SLD)

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Effects of Active Parental Consent on Response Rates for a Statewide Secondary School Substance Use Survey and Relationships with School Level Measures of Student Ethnicity, Poverty and Educational Advancement[1]

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Legislative mandates in California and at the federal level require written parental consent for surveys of children and youth on sexual behavior and attitudes; illegal, anti-social and criminal behavior; and psychological problems. Active parental refusal and non response to requests for permission threaten the generalizability of information obtained in large scale population surveys. The California Student Substance Use Survey (CSSUS), administered biennially since 1985, initiated an active consent policy for the most recent (1995-96) survey. Thirty-eight percent of the intended sample was lost as a result of the consent requirement, 6% due to denial of permission and 32% due to failure to return consent forms. School level student data revealed that parental response rates correlated significantly and negatively with measures of poverty (% on AFDC and % on school food programs) and positively with measures of educational advancement (% of seniors graduating and % taking college preparation courses), as well as with % Asian students. Feasibility of proposed tactics for increasing response rate are cited and dismissed as impractical for large scale surveys. The tendency of media and interested parties to ignore qualifications by researchers about the generalizability to the intended population of samples based on active parental consent are noted.

In April, 1996 the Family Privacy Protection Act (H.R. 1271) passed the House and moved on to the United States Senate. This event rang alarm bells throughout the community of researchers who study risk factors affecting children and youth. The provisions of this bill would require prior written consent from parents in any of seven areas including sexual behavior and attitudes; illegal, anti-social and self-incriminating behavior; and psychological problems.

Evidence has already accumulated that response rates under active consent requirements vary significantly in relation to cultural, educational, and economic characteristics of respondents. In earlier studies Kandel & Davies (1991) reported higher response rates to alcohol, drug, and tobacco (ATOD) surveys for predominantly white compared to predominantly non-white schools. Kearney, Hopkins, Mauss, & Weisheit (1983) found whites to be relatively over-represented and Afro-Americans and Asians relatively under-represented. The response rate in the first of the above studies was 68% (the same as in the current study), but only 51% for Kearny, et al. (1983). Anderman, C., Cheadle, A. Curry, S., Diehr, P., Shultz, L., & Wagner, E., (1995) reported that students whose parents returned consent forms were more likely to be white, have a B or higher GPA, be female, and live in a two parent household. Dent, Galaif, Sussman, Stacy, Burtun, & Flay

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(1993), in a tobacco survey, found that members of a passive consent sample were more likely to be male, have less educated parents, be in a minority group, be disenchanted at school, and smoke cigarettes.

Even if the equivalent of H.R. 1271 fails to pass the Senate, existing legislative mandates already require active parental consent. The *Pupil Protection Rights Amendment of 1994 to the Goals 2000: Educate America Act* requires that any school using US Department of Education funds to conduct a survey must obtain written consent if collecting information in sensitive areas, two of which relate to substance use surveys: (a) mental and psychological problems and (b) illegal, antisocial, self-incriminating and demeaning behavior. In California, Senate Bill SB56 requires written parental consent when asking adolescents questions about sex, religion, morality, or parental beliefs and practices. The survey on which the results of this report are based avoids these areas, except that the exceedingly broad brush implied in the term "morality" could be interpreted as including admission of use of illegal substances, even under conditions of anonymity.

As a result of the overall climate, agencies sponsoring the California Student Substance Use Survey, conducted biennially since 1985 under a passive consent policy, recommended adoption of active parental consent procedures for the latest (1995-96) administration.[2] This change threatened the continuity of a survey based on a stratified random sample of schools and random sampling of classrooms within schools in the nation's largest, and ethnically and racially most heterogeneous, state.

The findings in this report are notable by virtue of (1) being derived from the largest survey of youth substance use yet to implement an active consent requirement; (2) providing estimates of rate of active acceptance, active refusal, and passive non-response likely to be occur with other large scale surveys, (3) being the first study to relate school level response rates to school characteristics reflecting aggregated student social, educational, and economic indicators.

The report also notes that concerned parties and the press generally ignore warnings by researchers on the inappropriateness of (a) assuming that results obtained for an active consent sample are representative of the intended survey population and (b) comparing active consent findings with prior findings based on passive consent samples. The cautions and qualifications scientists make about generalizability tend to be disregarded in the making of what is called "news" as well as to the way in which interested parties interpret findings relating to partisan political issues.

The California Student Substance Use Survey

The Sixth Biennial Statewide Substance Use Survey (Skager, & Austin, 1997) was administered in late fall 1995 and early Winter 1996 to students in 117 California public and 11 private school students in grades 7, 9, and 11. Senior high schools were randomly selected proportionally to the number of schools in each of six geographic regions of the state. For each high school, a "feeder" junior high or middle school was selected which

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[2] The survey is supported by four California state agencies: The Office of the Attorney General, the Department of Education, Department of Alcohol and Drug Programs, and the Department of Health Services.

enrolled 7th grade students who were as similar as possible demographically to students in the senior high school. Two classrooms in each grade level were randomly selected by project staff. A total of 5,775 students were ultimately assessed across the three grade levels. [3]

The survey is administered under conditions of strict anonymity. It assess use of alcohol and illicit drugs, problems associated with use, as well as related attitudes, experience, and opinions. The survey administration was also conducted by project proctors.

Recruitment Under Active Parental Consent

Participating schools sent informed consent materials home with each student in the selected classes. The materials were accompanied by a letter from the principal explaining the nature and purpose of the survey and assuring anonymity of respondents and confidentiality of the results.[4] In addition to the consent form itself, consent materials included information on the sponsorship of the survey, the rights of participants, the content and method of the survey, a description of possible risks and benefits, whom to contact with questions, and a Bill of Rights for participants. Students and parents were informed that one dollar would be contributed to the school for each signed consent form returned, regardless of whether or not they agreed to participate.

Local school coordinators and teachers were responsible for keeping a record of those students whose parents agreed on participation as well as identifying them on the time of the survey administration. Coordinators were also responsible for making arrangements for the survey administration and assuring attendance by participating students. While classroom selection and administration of the survey were conducted by project staff, significant responsibility was thus vested in the school in the person of the site coordinator and principal.

Measures of School Characteristics

Nine school characteristics from the 1994-95 California Basic Educational Data System (CBEDS) were selected for this study: Total School Enrollment (TSE); percent Afro-American (%A-A), Asian (%A) Hispanic (%H), White (%W); percent Limited English Proficiency (%LEP): percent of school enrollment receiving Aid to Families with Dependent Children (%AFDC); number of graduates divided by number of 12th graders (%Grads); and number of graduates with college preparation courses divided by number of 12th graders (%CPC).[5] These data were available for public schools only.

Overall Response Rates for 1991-92, 1993-94, and Current Survey

Table 1 compares response rates for the 1991-92, 1993-94 and 1995-96 surveys (Skager, R., & Austin, G., 1993; Austin, G., & Skager, R., 1996; Skager, R., & Austin, G., 1997). Previous passive consent surveys (including 1991-92 and 1993-94) were not compromised by parental refusal of permission. The numbers of parents exercising this

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[3] Prevalence data were of course weighted for school enrollment and overrepresentation of female respondents, the latter occurring for the first time in this survey, another probable effect of active consent.

[4] Forms were available in Spanish, Cantonese, Vietnamese, and Hmong, in addition to English.

[5] CBEDS information on all California public schools is compiled and distributed by the California Department of Education.

right has always been minuscule. In the case of the 1991-92 survey, failure to participate by targeted students was mainly due to absenteeism on the day of administration or occasional confusions in scheduling or notification. However, there was a notable drop in response rate for the last passive consent survey (1993-94). This decline in participation rate was at least in part associated with significant changes in survey procedures. These included use of optical scanned answer sheets (instead of marking in the test booklet) and selection of students and administration of the survey by project staff. Whatever the reasons were for lower participation compared to 1991-92, parental consent was not a factor.

Table 1

Percentage of Schools with Student Response Rates Less than 30%, Greater than 50%, and Greater than 80% and Modal Response Rate for 1991, 1993, and 1995

Survey Year	30% or less	50% or more	80% or more	Modal %
1991	2.5	95	75	95-100%
1993	6	85	24	70-75%
1995	13	67	9	55-60%

The last column of Table 1 reveals that the modal (most frequent) student response rate by school declined from 95% in 1991-92 to 55% in the most recent (active consent) survey. Similarly, in the 1991 survey 95% of the schools had an 50% or greater student response rate compared to 85% in 1995-96 and 67% in the last survey.

Return and Participation Rates Under Active Consent

The parental consent and participation rates are reported in Table 2.

Table 2

Comparisons among Response Rates for the 1991-92, 1993-94, and 1995-96 California Student Substance Use Surveys

	CSS (%)
Students returning consent forms	68
Students returning consent form marked "Yes"	62
Students returning "Yes" forms who were surveyed	92
Final response rate	57

Sixty-eight percent of the targeted students returned consent forms, of which 62% (of the total intended sample) were marked "yes." Of the latter," 92% actually took the survey. The noticeable loss of eligible participants in the 1993-94 survey did not occur among

1995-96 students whose parents returned signed consent forms. The 8%who did not can be accounted for by normal absences or scheduling conflicts such as field trips. Finally, 57% percent of the targeted students actually took the survey.

Table 2 also suggests that school response rates fluctuated widely around the modal 55% return rate. For example, in four schools 100% of the targeted students were assessed compared to less than 10% in the three schools with the lowest response rates. There was also considerable fluctuation in response rates for classrooms within the same school, suggesting a possible teacher effect.

What kind of sampling bias was the loss, directly associated with the consent requirement, of 38% of the targeted students? To answer this question student characteristics aggregated at the school level were correlated with school response rate.

Correlates of School Response Rates

Table 3 displays the correlations between school response rate and the school characteristics listed above.

Three of the poverty measures were negatively related to response rate. The % of families receiving AFDC was significantly related for each of the three grade levels. The percentage of students receiving free or reduced-cost meals was significant for 7th grade only, but school food programs for poor students ordinarily serve only the lower grades.

Table 3

Relationships between School Level Student Characteristics and School Response Rates for Grades 7, 9, and 11

Variable	CSS 7th	CSS 9th	CSS 11th
Total School Enrollment	.06 (p=.67)	.16 (p=.21)	**.26 (p=.045)**
% Asian	**.33 (p=.016)**	.17 (p=.20)	**.29 (p=.045)**
% Black	-.23 (p=.09)	-.25 (p=.06)	.14 (p=.27)
% Hispanic	-.08 (p=.54)	.01 (p=.97)	-.03 (p=.79)
% White	.13 (p=.34)	.08 (p=.53)	.12 (p=.37)
% LEP	.14 (p=.3)	.03 (p=.83)	-.11 (p=.39)
% Free Meals	**-.41 (p=.002)**	-.19 (p=.14)	-.19 (p=.14)
% AFDC	**-.40 (p=.003)**	**-.34 (p=.009)**	**-.34 (p=.008)**
% Graduates	—	**.32 (p=.015)**	**.31 (p=.014)**
% College Prep Courses	--	.15 (p=.27)	**.27 (p=.038)**

*School level data from California Basic Educational Database System

Twelfth grade graduation rate was positively related to response rate for grades 9 and 11. So was the percent taking college preparation classes for grade 11, the only grade level where such courses are likely to be offered. These variables as a group reflect economic

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and educational relationships, the poverty measures correlating negatively and the educational achievement measures positively.

Only one of the ethnic measures (% Asian) was correlated with response rate (positively), although % Afro-American came close to significance (negatively) for grades 7 and 9. The parental consent policy thus biased the sample through loss of respondents in schools enrolling students at the lower end of the economic ladder vs. schools at the higher end where students took more college preparation courses and graduation rates were considerably higher. This bias also accounts for the somewhat higher proportion of female respondents in this survey, an effect also reported in prior research on active parental consent (Dent, et al., 1993).

This bias may have operated in two ways. First, parents at the very low end of the educational and economic continuum were less likely to return consent forms. In other words, the problem was not that parents declined directly, but that *significant numbers choose not to respond at all*. Second, it is also possible that cooperation by school staff in implementing the parental consent procedures was less diligent in schools where response rates were lower, e.g., in schools enrolling students from situations of poverty and low educational attainment. While there were some anecdotal reports for the later from project staff, this information was not collected systematically.

Discussion and Implications

These results reveal significant relationships under active parental consent of poverty and educational attainment measures with survey response rates. Poverty-related indices at the school level were associated with significantly greater non-response by parents, while measures of graduation rate and college preparatory work were positively related to response rate.

The California findings on race/ethnicity were less definitive than those in prior studies. In contrast to findings reported by Kearny, et al. (1983), percent Asian students correlated positively (rather than negatively) with response rate. Correlations for percent Afro-American were negatively in sign at each grade level, but not statistically significant. Percent limited English Speaking was unrelated to response rate, perhaps due to the heterogeneity of LEP students in California.

That an active parental consent requirement introduces bias into surveys of heterogeneous populations is clearly evident. What, then, can be done in situations where active consent cannot be avoided? Three possible strategies have been suggested in the literature.

- making special efforts including additional reminders, rewards, and direct requests by telephone
- turning to telephone surveys in which consent can be solicited directly and paper and pencil questionnaires avoided
- Adjusting prevalence findings through use of other information which predicts substance use

The first alternative was explored by Ellickson & Hawes (1989) who, in addition to sending postcard reminders and a second consent packet, made telephone calls to non-respondents, requested daily reminders by teachers, and held special parent meetings. This effort ultimately produced an 86% response rate (only 34% before the special efforts) in a relatively homogeneous, predominantly white suburban school. However, the cost of achieving this goal was clearly prohibitive for any large scale population study (the telephone calls alone cost about $25 per case).

Ellickson & Hawes (1989) also suggested that failure to return consent forms is considerably more likely to reflect latent consent than latent refusal. This is a reasonable inference from the experience of the current investigators. In over 10 years conducting a statewide survey under passive consent there has not been a single recorded instance of complaints by parents that their students were surveyed against either their, or their child's, will.

This conclusion was also confirmed by results of telephone surveys. Moberg & Piper (1990) managed to increase consent rate by 20% (from 59% for mailed materials) by telephoning parents who had not returned consent cards. However, this was achieved by accepting verbal consent only. The additional yield would have been only 8.5% had the researchers depended on return of permission cards after telephone contacts. In the current context of sensitivity and suspicion, mere verbal consent probably would not be sufficient from the perspective of Institutional Review Boards.

Telephone surveys also incorporate an obvious threat to validity. Ordinarily, respondents have to be called at their homes. It would be naive to imagine that most youth would confess to behaviors likely to be disapproved by their parents when the latter might overhear them. Telephone interviewing is appropriate for non-sensitive areas of inquiry where active consent is not ordinarily an issue.

In a multi-state study Anderman, et al. (1995) surveyed 9th and 12th grade students on health related information including sexual behavior and ATOD use. These researchers anticipated that questions on sexual behavior and attitudes would be more objectionable to parents than ATOD questions. For the California schools, where it was not possible to use a passive consent policy, parents were given the option to return a card indicating either permission or refusal to take the complete survey. They were also informed that, if they did not return the card, their child would answer a survey which did not include any of the questions on sexual behavior. The latter option provided a kind of passive consent group in that behaviors other than sexual were assessed without explicit parental approval. However, this group presumably included parents who would not respond pro or con to the consent materials whatever the content of the questionnaire, along with parents who were willing to have their children answer questions on substance use but not on sexual behavior.

A surprising finding of this study was that there were no significant differences between the active and passive consent groups on substance use measures and only a few on other risk measures. Nonetheless, these authors appropriately denied that such results justified generalization of findings from written consent groups to groups who did not give written consent. They did suggest the possibility of using maximum likelihood techniques to

adjust results from biased samples. The potential utility of such statistical estimation approaches cannot be addressed here.

A Cautionary Note

Researchers are accustomed to searching vigorously for possible sampling bias and cautioning readers against inappropriate generalizations where such bias is found. In the final report (Skager & Austin, 1997) for the current survey, it was clearly stated that results could not be generalized to the population of California secondary school students as a whole nor interpreted as reflecting changes over previous survey results. Rather, the prevalence rates could apply only to a sub-population for which parents would be willing to give written consent. The phrase, "provides a new baseline" was used to reinforce these assertions. This qualification was also made in the press conference announcing the results of the survey, first by the California Attorney General and later by one of the authors.

In no case were the qualifications about sample bias reported by the news media covering the press conference. The survey results were also widely interpreted as revealing differences from prior findings, even though such differences could have been largely or entirely due to sampling bias.

Our experience should serve as a warning to those who do survey research in politically sensitive areas. Results will be accepted or denied because they fit particular agendas rather than on the basis of scientific standards of precision and objectivity. For most of the media, the agenda is the news bite that attracts attention, which certainly does not include qualifications about sampling bias or confidence intervals. For the politically engaged, the criterion all too often is whether or not the findings can be interpreted as supporting a particular point of view about policy.

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